

605

ORIGINAL

# ATTESTATION PAPER.

No. 61841

Folio.

## CANADIAN OVER-SEAS EXPEDITIONARY FORCE.

### QUESTIONS TO BE PUT BEFORE ATTESTATION.

(ANSWERS)

1. What is your name?..... *Robert, Floremon*

2. In what Town, Township or Parish, and in what Country were you born?..... *St. Hubert, Que.*

3. What is the name of your next-of-kin?..... *(father) Deudonne Robert*

4. What is the address of your next-of-kin?..... *St Lambert, Que.*

5. What is the date of your birth?..... *8th Aug 1893*

6. What is your Trade or Calling?..... *Driver*

7. Are you married?..... *no*

8. Are you willing to be vaccinated or re-vaccinated?..... *Yes.*

9. Do you now belong to the Active Militia?..... *no*

10. Have you ever served in any Military Force?..... *no*  
If so, state particulars of former Service.

11. Do you understand the nature and terms of your engagement?..... *Yes*

12. Are you willing to be attested to serve in the CANADIAN OVER-SEAS EXPEDITIONARY FORCE?..... *Yes*

*R. Floremon* (Signature of Man).  
*G. Gervais* (Signature of Witness).

### DECLARATION TO BE MADE BY MAN ON ATTESTATION.

I, *Floremon Robert*, do solemnly declare that the above answers made by me to the above questions are true, and that I am willing to fulfil the engagements by me now made, and I hereby engage and agree to serve in the Canadian Over-Seas Expeditionary Force, and to be attached to any arm of the service therein, for the term of one year, or during the war now existing between Great Britain and Germany should that war last longer than one year, and for six months after the termination of that war provided His Majesty should so long require my services, or until legally discharged.

*Floremon Robert* (Signature of Recruit)  
*G. Gervais* (Signature of Witness)

Date *Dec. 11th* 1914.

### OATH TO BE TAKEN BY MAN ON ATTESTATION.

I, *Floremon Robert*, do make Oath, that I will be faithful and bear true Allegiance to His Majesty King George the Fifth, His Heirs and Successors, and that I will as in duty bound honestly and faithfully defend His Majesty, His Heirs and Successors, in Person, Crown and Dignity, against all enemies, and will observe and obey all orders of His Majesty, His Heirs and Successors, and of all the Generals and Officers set over me. So help me God.

*Floremon Robert* (Signature of Recruit)  
*G. Gervais* (Signature of Witness)

Date *Dec. 11th* 1914.

### CERTIFICATE OF MAGISTRATE.

The Recruit above-named was cautioned by me that if he made any false answer to any of the above questions he would be liable to be punished as provided in the Army Act.  
The above questions were then read to the Recruit in my presence.  
I have taken care that he understands each question, and that his answer to each question has been duly entered as replied to, and the said Recruit has made and signed the declaration and taken the oath before me, at *St Johns* this *11th* day of *December* 1914.

*[Signature]* (Signature of Justice)

I certify that the above is a true copy of the Attestation of the above-named Recruit.

*[Signature]* (Approving Officer)

*J. A. J. - [Signature]*

Description of Robert, Harmon on Enlistment.

Apparent Age 21 years 4 months.  
 (To be determined according to the instructions given in the Regulations for Army Medical Services.)

Distinctive marks, and marks indicating congenital peculiarities or previous disease.

(Should the Medical Officer be of opinion that the recruit has served before, he will, unless the man acknowledges to any previous service, attach a slip to that effect, for the information of the Approving Officer.)

Height 5 ft. 10 1/2 ins.

*Tattoo left fore arm.  
 woman red Black ink  
 light brown spot right  
 hip  
 Brown spot. below  
 left nipple.*

Chest measure-  
 ment. { Girth when fully ex-  
 panded 35 ins.  
 Range of expansion 3 ins.

Complexion Black

Eyes high Brown R.D. 15 L.D. 15

Hair Black

Religious denominations.  
 { Church of England .....  
 Presbyterian .....  
 Wesleyan .....  
 Baptist or Congregationalist .....  
 Other Protestants .....  
 (Denomination to be stated.)  
 Roman Catholic Yes .....  
 Jewish .....

CERTIFICATE OF MEDICAL EXAMINATION.

I have examined the above-named Recruit and find that he does not present any of the causes of rejection specified in the Regulations for Army Medical Services.

He can see at the required distance with either eye; his heart and lungs are healthy; he has the free use of his joints and limbs, and he declares that he is not subject to fits of any description.

I consider him\* Fit for the Canadian Over-Seas Expeditionary Force.

Date 11 December 1914.

*N. M. Sabourin*

Place Saint Jean

*L. Col. R. D.*  
 Medical Officer.

\*Insert here "fit" or "unfit."

NOTE.—Should the Medical Officer consider the Recruit unfit, he will fill in the foregoing Certificate only in the case of those who have been attested, and will briefly state below the cause of unfitness:—

CERTIFICATE OF OFFICER COMMANDING UNIT.

*Harmon Robert*

..... having been finally approved and inspected by me this day, and his Name, Age, Date of Attestation, and every prescribed particular having been recorded, I certify that I am satisfied with the correctness of this Attestation.

*J. A. Gaudet* (Signature of Officer)

Date ..... 1914.

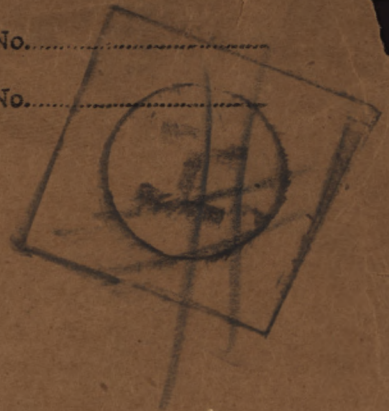
Colonel

O. C. 22ND F. C. BATTALION

DISCHARGE DOCUMENTS

R. O. No. ....

H. Q. No. ....



Name ROBERT FLOREMON

Regt. No. 61841 Rank Plt

Corps 22<sup>nd</sup> Bn.

*Kind 3-6-16*

- .....
- ..... of change of name.....
- ..... for special enlistments.....
- Documents of re-enlisted men.....
- Regimental Conduct Sheet.....
- Compulsory Stoppages.....
- Casualty Forms.....
- Proceedings on discharge.....
- Corps History Sheet.....
- Date and No. of Deposit Receipt for Purchase Money and Amount.....
- Parchment Certificate.....
- Medical Report for Invalids.....
- Medical History Sheet.....
- Proceedings of Regt. Court Martial.....
- Copies of Convictions by Civil Power.....
- Company Conduct Sheet.....
- Clothing Transfer Certificate.....
- Inventory of Kit.....
- Last Pay Certificate.....

*22*

*Box # 8324*

14841

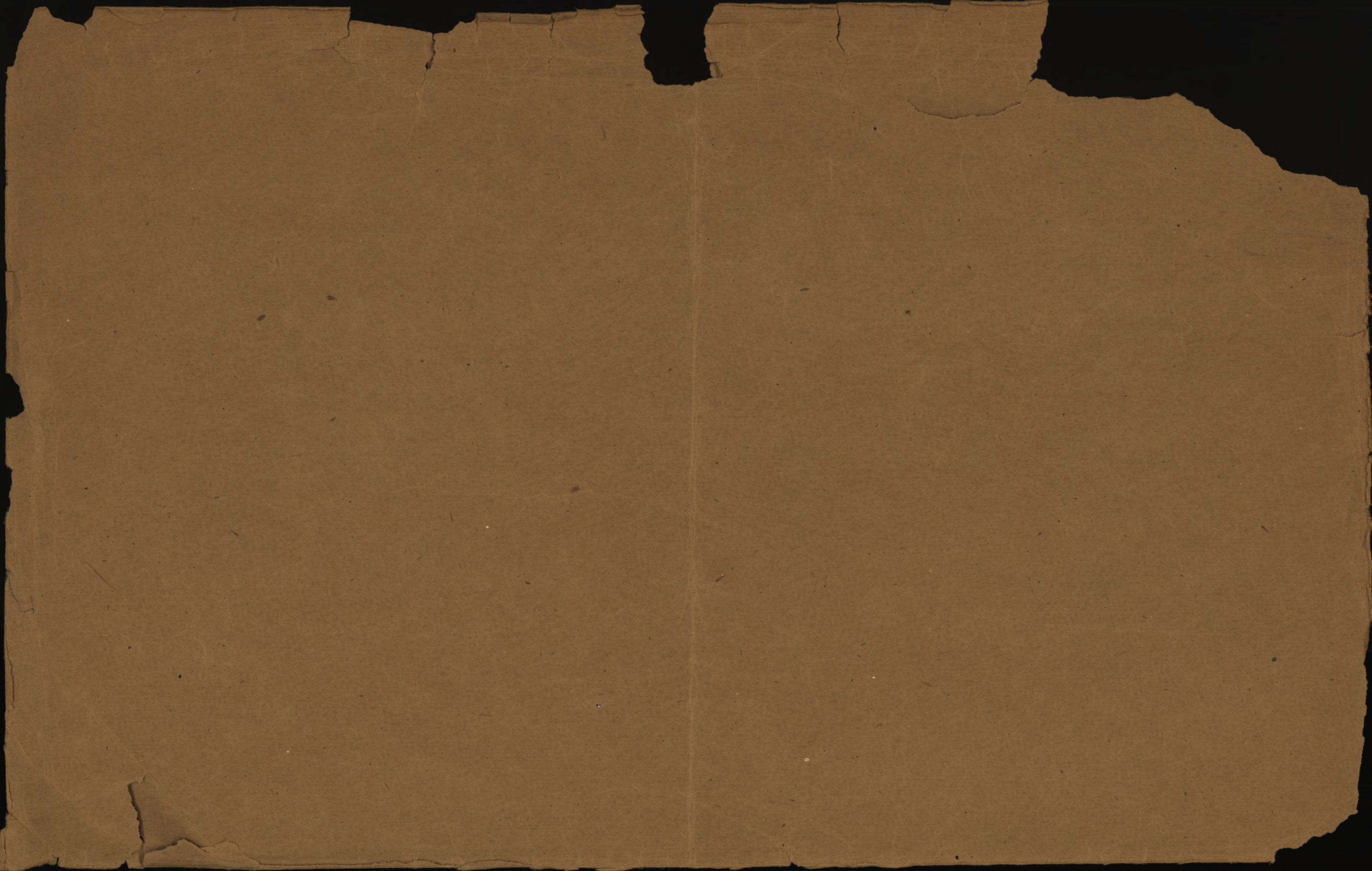
*Box 482038*

*27-31*  
*14-1*  
*1*

CANADIAN FORCES  
RECORDS CENTRE  
PLUS JACKET  
ROOM

*mx*  
*15-9-20*  
*845*

*has card*  
*1-11-22*  
*1 Pay card*



61841

I.D. number  
No. d'identification

ROBERT

Surname  
Nom de famille

FLOREMON

Given names  
Prénoms

KILLED IN ACTION: 3-6-16

**PERSONNEL RECORDS CENTRE**  
**CENTRE DES DOCUMENTS DU**  
**PERSONNEL**

**PERSONNEL RECORDS ENVELOPE**  
**ENVELOPPE DES DOSSIERS DU PERSONNEL**

Location  
Lieu

8324

**« CONTENTS CONFIDENTIAL »**  
**« CONTENU CONFIDENTIEL »**

8324

No 1841

RANK

Pte

NAME

Robert Fleurimont

T. O. S. 11/12/14.

UNIT

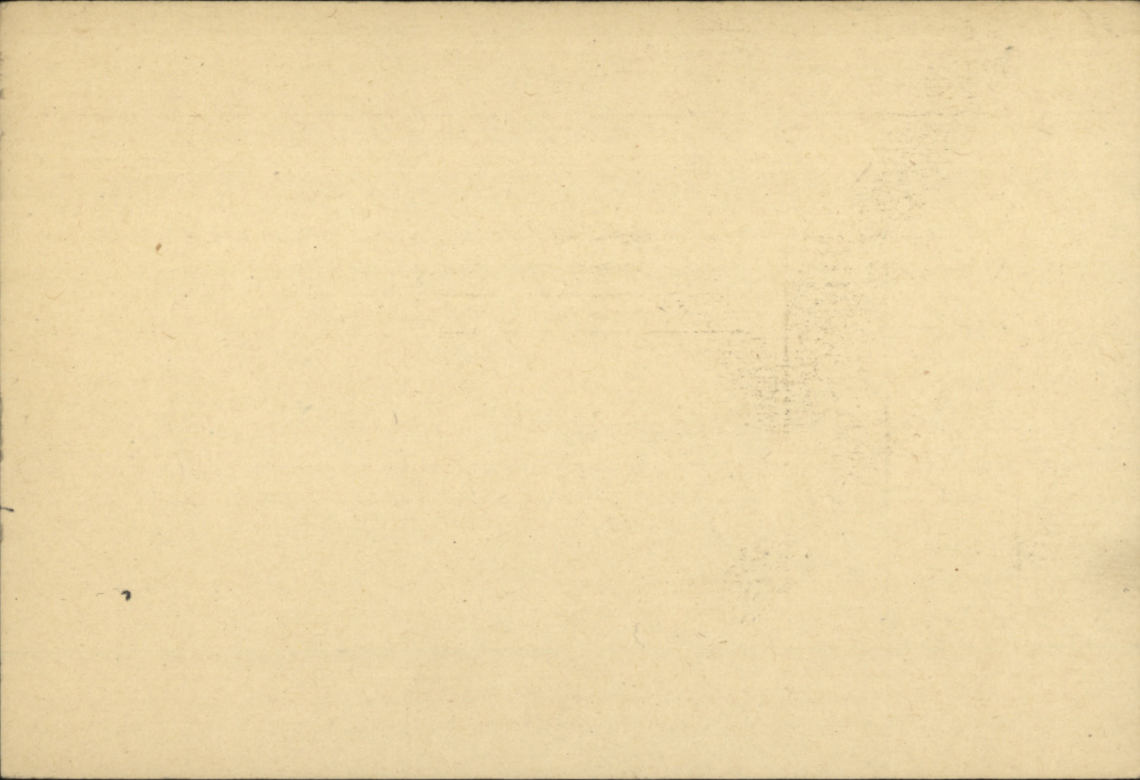
22<sup>nd</sup> Battalion (French Canadian)No #  
31

11/12/14

M. D. 4

PAID FROM	PAID TO	SIG. OR REC'T	PROMOTIONS, TRANSFERS, DISCHARGES, ETC.	
			PARTICULARS	AUTHORITY
1914	1914			
Dec 11	Dec 31	✓		
1915	1915			
Jan		✓	profits 1 days pay	# 2869. 28-1-14.
Feb		✓		
Mar		✓		
Apr		✓		
May		✓		
June		N		

UNIT SAILED  
MAY 20 1915





NAME

Robert Floreman

H. Q. FILE No. 649-

REGT'L. No.

61841

RANK AND CORPS

Pte

22<sup>nd</sup> Battalion

CABLE

NO.

DATE

NATURE OF CASUALTY

M 7720

9-6-16

C  
Killed in action June 3<sup>rd</sup> 1916 ✓

A. F. B.

2090 a

" " " " " "

Rouen

4-6-16

LIST No.

HOSPITAL

DATE OF  
ADMISSION

REMARKS

A 243

3-6-16

Killed in action

R. 149.

Name Robert Floreman Rank Pte.

Reg. No. 61841

Unit 22nd. Batt.

Rt. 25. h. 500.

Next of Kin Canada

Date 1916	Movement	Place	Casualty	List No.	Notified N/K O.	W.O. List
3-6	O/C. Batt. Repts. KILLED IN ACTION			A243	<sup>M</sup> 7720	10-6



649-R-1715. 61841 Pte. Floreman Robert, C.E.F. J.G.A. G

*Eligible for 4 = 17-Star, 22nd Bn. Pte. 22nd Bn.*

Medals & Dec. (Father) Diedonne Robert, Esq.,  
621 Notre Dame St.,  
St. Lambert, Montreal,  
P.Q.,

Pracque & Scroll. (Father) Same as above.

*(Serial no. 770111.)*

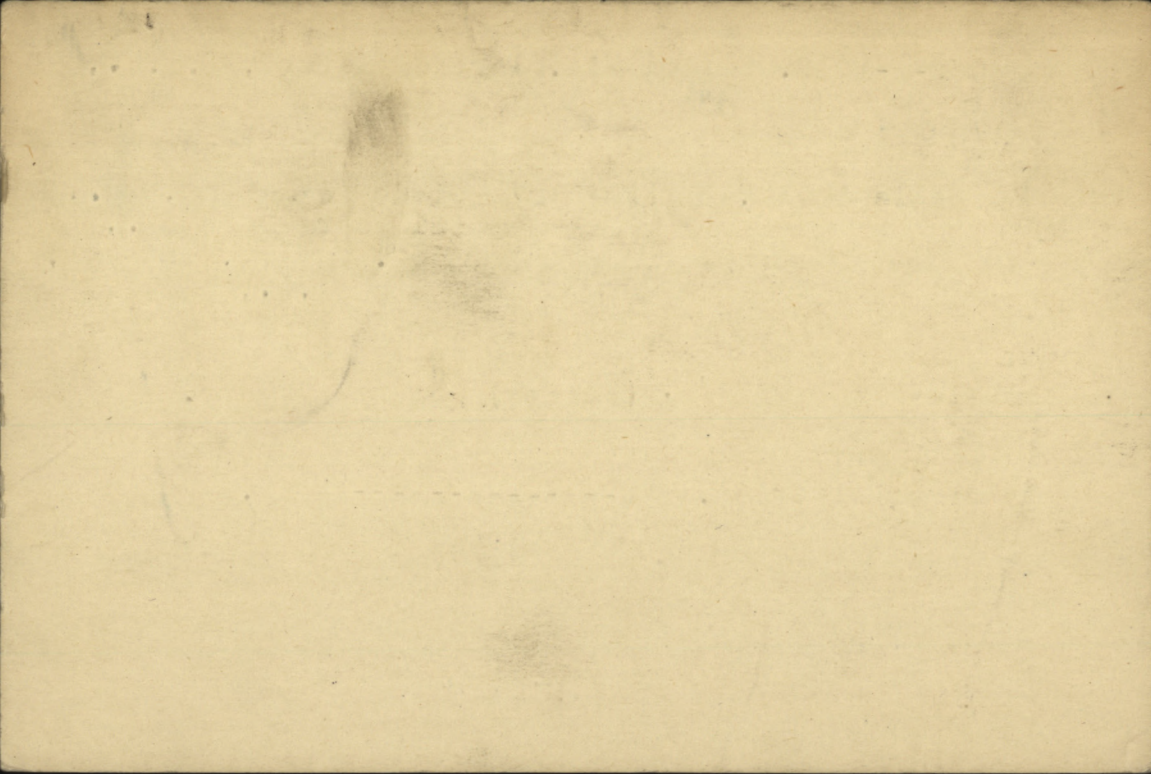
Memorial Cross. (-----Nil.)

Scroll Desp. JAN 21 1921 Reqn. No. 312119

Plaque Desp. JUL 12 1922 Reqn. No. P42141

24195

*J.A.S.*



NAME

Robert, Floremont (649-R-1715)

D

RANK & No.

Pte.

61841

CORPS

22<sup>nd</sup>.

Battalion

ENLISTMENT, PLACE

St Johns  
Nfld

DATE

Dec. 11/14

FORMER CORPS

COUNTRY OF BIRTH

Canada, St Hubert P.I.

NEXT OF KIN

Robert. Dieudonne (father)

ADDRESS OF NEXT

621 Notre Dame St.  
St. Lambert. N. Montreal  
P.Q.

DISCHARGE, PLACE

(8/30/1116)  
(649-R-1715)

DATE

Sailed from Halifax per S.S. "Saxonia" 20-5-15

87  
16.

M. F. W. 22. 50 m. - 1-15.





Number..... 61841..... Rank..... PTE.....

Surname..... ROBERT.....

Christian Name..... Fleeman.....

Units..... 22<sup>nd</sup> Bx Gen. Inf. Theatre of War..... France

Date of Service..... 15-9-15.....

Remarks..... Father.....

Latest Address.....

Roll No.....

McDonne Roberts Esq.  
621. Notre Dame St.  
St. Lambert,  
Montreal, P.Q.

not  
com

R

X

D

Next of kin \_\_\_\_\_

Address on leave \_\_\_\_\_

Address on discharge \_\_\_\_\_

Transportation issued Yes No Date \_\_\_\_\_

Character on discharge \_\_\_\_\_

Previous occupation \_\_\_\_\_ Date and place of enlistment \_\_\_\_\_

Diagnosis \_\_\_\_\_ Date \_\_\_\_\_ Date of Medical Boards \_\_\_\_\_

Remarks \_\_\_\_\_

DESP MAR 28 1928  
REGN. NO. 445014

—Name will be given in full; surname first.

Surname  
**Robert**  
Rank  
**Plt-**  
Hospital

Christian Name or Names

**J.**  
Unit  
**22<sup>nd</sup> Bn.**

Reg. No.

**61841**  
Troop Batty.

Date of Admission

Transferred

Hosp.

Hosp.

Hosp.

Hosp.

Diagnosis

(1)  
Later Diagnosis (if changed)

(2)

(3)

Additional Diagnosis: if more than one state present

DISPOSITION

**Killed in Action 3.6.16**  
**afc. Bn. reptd**

Date

**Ch. 10.6-16 #2243**

REMARKS

A.M.D. 2 DEPT.

Beh. of D.G.M.S. O.M.F.C. London.

*m?*

EPITOME OF HOSPITAL TREATMENT.

Hospital

Adm.

1.

2.

3.

4.

5.

6.

7.

# MEDICAL HISTORY SHEET.

Surname Robert Christian Name Bloumon

Examined { on 11 day of Dec 1914  
 at St John's  
 Birthplace { City or Town St Hubert, P.g.  
 County \_\_\_\_\_

Approved by Masabaurm  
 Rank St Col. Ame M.O.

Apparent age 21 yrs 4 mos.  
 Trade or occupation Driver  
 Height 5 Feet 10 1/2 Inches.  
 Weight \_\_\_\_\_ Lbs.  
 Chest measurement { Minimum 35 inches.  
 Maximum expansion 38 inches.  
 Physical development \_\_\_\_\_  
 Small-Pox Marks \_\_\_\_\_

Date	Fit or Unfit	EXAMINED FOR RE-ENGAGEMENT,
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.
		M.O.

Vaccination Marks { Arm Right Left  
 Number \_\_\_\_\_  
 When Vaccinated last \_\_\_\_\_  
 (a) Marks indicating congenital peculiarities or previous disease \_\_\_\_\_

Date	Result	VACCINATIONS.
<u>APR 24 '18</u>		<u>[Signature]</u> M.O.
		M.O.
		M.O.

(b) Slight defects but not sufficient to cause rejection \_\_\_\_\_

Date	Result	ANTI-TYPHOID INOCULATIONS, ETC.
<u>FEB 28 '18</u>		<u>[Signature]</u> M.O.
		M.O.
		M.O.

Enlisted on 11 day of Dec 1914 at St John's

	CORPS.	REG'T'L NUMBER.	HABITS.	DATE.
Joined on enlistment	<u>22nd X.C. Bn</u>	<u>61841</u>		
Transferred to.. ..				

### EXAMINED OR DISCHARGED BY A MEDICAL BOARD.

STATION.	DATE.	DISEASE.	RESULT.

N. B.—This sheet to be disposed of in accordance with instructions in the Regulations for Army Medical Service, on the man becoming non-effective ; the date and cause being stated on next page.



## Casualty Form—Active Service.

CERTIFIED CORRECT.

Canadian Record Office,  
Westminster House,  
7, Millbank, S.W.Regiment or Corps 22<sup>nd</sup> (F.C.) BattalionRegimental No. 61841 Rank Private Name Robert F. LoremanEnlisted (a) 11.12.14 Terms of Service (a) for war Service reckons from (a) 11.12.14Date of promotion to } Date of appointment } Numerical position on }  
present rank } to lance rank } roll of N.C.Os. }

Extended \_\_\_\_\_ Re-engaged \_\_\_\_\_ Qualification (b) \_\_\_\_\_ ✓

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 33, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				
5 <sup>6</sup> / <sub>16</sub>	OCB	Disembarked killed in action	Boulogne field	15 <sup>9</sup> / <sub>15</sub> 3 <sup>5</sup> / <sub>16</sub>	Deleg. P.M. 136- Part 2 ord. 23 d/7-6-16 131-6 <sup>6</sup> / <sub>16</sub>  Lieutenant for Lt. Col. A. A. G.

(a) In the case of a man who has re-engaged for, or enlisted into Section D. Army Reserve, particulars of such re-engagement or enlistment will be entered.  
(b) e.g., Signaller, Shoeing Smith, etc., etc., also special qualifications in technical Corps duties.

Report		Record of promotions, reductions, transfers, casualties, etc., during active service, as reported on Army Form B. 213, Army Form A. 36, or in other official documents. The authority to be quoted in each case.	Place	Date	Remarks taken from Army Form B. 213, Army Form A. 36, or other official documents.
Date	From whom received				



Rank \_\_\_\_\_ Name **ROBERT Floreman** Reg'l No. **61841**  
 Unit **22nd Bn.** If in perm. Corps, \_\_\_\_\_ Married or Single **Single.**  
 What Unit? \_\_\_\_\_  
 Place and Date of Enlistment **St John's Que. 11th Dec. 1914** Place of Birth **St Hubert. Que.**  
 Name and Address, Next-of-Kin **Dieudonne Robert, St Lambert P.Q.**  
 Relationship **Father.**

Assigned Pay Monthly \$ \_\_\_\_\_ Payable to \_\_\_\_\_  
 Relationship \_\_\_\_\_

Separation Allowance \$ \_\_\_\_\_ Payable to \_\_\_\_\_  
 Relationship \_\_\_\_\_

*My  
15 9 27  
J.A.*

Discharge, Date and Place \_\_\_\_\_ Reason \_\_\_\_\_ Character \_\_\_\_\_

Report		Record of promotions, reductions, transfers, casualties, etc., during active service. The authority to be quoted in each case.	Place	Date	REMARKS Taken from Official Documents
Date	From whom received				
		arrived in England, per S. S. Saxonia		29-5-15	
	19 SEP 1915	Embarked for France.	Folkestone	15 SEP 1915	Emb. Memo 288
10.6.16	22 <sup>d</sup> Bn	Killed in Action	In the Field	3.6.16	C.L.A. 243 ON.
7.6.16	"	"	"	"	Pt. II-23

(M)

(H)



Rank *Pte.*Name **ROBERT Floreman**Reg'l No. **61841**Unit **22nd Bn.**If in perm. Corps,  
What Unit?Married or Single **Single.**Place and Date of Enlistment **St John's Que. 11th Dec. 1914**Place of Birth **St. Hubert. Que.**Name and Address, Next-of-Kin **Diudonne Robert, St Lambert P.Q.**Relationship **Father.**

Assigned Pay Monthly \$

Payable to

Relationship

Separation Allowance \$

Payable to

Relationship

Discharge, Date and Place **3/6/16.**Reason **Kd. in Action**Character **B.O.P. 7/6/16.**

Date		PAY			Field Allowance			Other Credits	Total Credits	Voucher		Cash Payments	Assigned pay	Other Charges	Total Debits	Balance	Remarks, Casualties, etc.
From	To	No. of Days	Rate	Amount	No. of Days	Rate	Amount			No.	Date						
	1915																
June 1	30	30	1.	30.	30	10	3.		33.			50.			50	3.	
1-7-15	31-7-15	31	1.	31	31	10	3 10		34 10			25			25	12 10	
<i>Adjust of Exchange</i>																	
									147							13 57	
																13 57	
1-8-15	31-8-15	31	1.	31	31	10	3 10		34 10			43 80			43 80	3 87	
1-9-15	30-9-15	30	1.	30	30	10	2 -		32 -			13 58			13 38	23 49	
1-10-15	31-10-15	31	1.	31	31	10	3 10		34 10			5 24			5 24	52 35	
1/11/15	30/11/15	30	1.	30	30	10	3 -		33 -			5 35			5 35	80	
1/12/15	31/12/15	31	1.	31	31	10	3 10		34 10			13 96			13 96	100 14	
1/1/16	31/1/16	31	1.	31	31	10	3 10		34 10			2 61			2 61	131 63	
1/2/16	29/2/16	29	1.	29	29	10	2 90		31 90			5 23			5 23	158 30	
1/3/16	31/3/16	31	1.	31	31	10	3 10		34 10			7 85			7 85	184 55	

Settled

BALANCE TRANSFERRED TO NEW LEDGER

Statement of  
OCT 6 1916  
Account renderedCash found in  
effects *None paid*Checked *J.R.R.*

305

30 50

147 336 97

152 42

152 42 184 55







22

To be used (a) for recruits enlisting direct into the Regular Army, and (b) for men of the Territorial Force when they are admitted to Hospital. Army Form B. 178<sup>A</sup> to be used for Special Reserve recruits and Special Reservists enlisting into the Regular Army.

MEDICAL HISTORY of

Surname ROBERT Christian Name Floremon

TABLE I.—GENERAL TABLE.

Birthplace ... Parish St. Hubert P.Q. County

Examined ... on 11 day of Dec 1914, at St. Johns

Declared Age ... 21 years 4 mos. days.

Trade or Occupation ... Driver

Height ... 5 feet 10 1/2 inches.

Weight ... lbs.

Chest Measurement { Girth when fully Expanded 38 inches. Range of Expansion 3 inches.

Physical Development ...

Vaccination Marks { Arm ... Right Left Number

When Vaccinated ...

Vision ... { R.E.—V= L.E.—V=

(a) Marks indicating congenital peculiarities or previous disease ... (a)

(b) Slight defects but not sufficient to cause rejection ... (b)

Approved by (Signature) N. A. Sabourin (Rank) Lt. Col A.M.C. Medical Officer.

Enlisted ... at St. Johns on 11 day of Dec 1914.

Table with 2 columns: Corps, Regtl. No. Row 1: 22nd F.C. Batt; 61841

Became non-effective by ...

(Signature) (Rank) on day of 191







